



# KJAM Studios & MPAC

## Registration Agreement

### And

## Waiver/Release of Lien

**PLEASE PRINT LEGIBLY**

**NAME** \_\_\_\_\_ **DOB** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**\*EMAIL** \_\_\_\_\_

*(We will only use your email to contact you with information regarding your class)*

**CELL PH** (\_\_\_\_) \_\_\_\_\_ **HOME PHONE** (\_\_\_\_) \_\_\_\_\_

**EMERGENCY CONTACT** \_\_\_\_\_

**EMERGENCY CONTACT CELL PHONE** (\_\_\_\_) \_\_\_\_\_

### “Waiver/Release of Lien/Agreement to Pay”

“Waiver/Release of Lien/Agreement to Pay” “I understand that there is a risk of potential injury associated with dance classes and performances. I represent that the above-named student(s) is in good health and physically capable of participating in dance classes and/or performances. On behalf of myself (and the above-named student(s), if different from the undersigned) I hereby waive and release any claim against KJAM Studios and MPAC, their staff, employees, landlord and contractors, arising out of a personal injury occurring in connection with classes and/or performances otherwise occurring in or around the dance studio or other location of classes and/or performances. I accept responsibility for obtaining appropriate accident, health and hospitalization insurance to cover me or my student in the event of personal injury. In the event of an injury or other medical emergency, if I cannot be reached, I authorize you to seek any medical assistance reasonably required in your judgment and agree to be responsible for medical expenses incurred on behalf of myself or my student. I also understand that to bring, supply or use harmful substances in or around the studio/events will not be tolerated and will result in the immediate dismissal of myself or my student from the studio/events. I give KJAM Studios and MPAC permission to use photographs, video and/or interviews in any publications or media presentations.” I agree to make payment according to the tuition payment option I choose below. **Initial** \_\_\_\_\_

**Signed** \_\_\_\_\_ **Dated** \_\_\_\_\_

**Parent of** \_\_\_\_\_ **Dated** \_\_\_\_\_

### *Tuition Payment Options*

- \$15/Class drop-in     Punch Card \$150 (12 punches per month @ \$12.50 ea.)
- Monthly Class Rates 1<sup>st</sup> Class \$50/mo., 2<sup>nd</sup> Class \$45/mo., 3<sup>rd</sup> Class \$40/mo., 4<sup>th</sup> Class plus \$35/mo.